

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		8-7-01
O.I.P.E. CLASSIFIER		2	61801
FORMALITY REVIEW	MM	572	08-01-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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